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## BIB DATA SHEET

CONFIRMATION NO. 3460

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/676,265	10/02/2003	165	3744	2507-8637.1US (22235-US-0)		
<b>APPLICANTS</b> Edward J. Kroliczek, Davidsonville, MD; Michael Nikitkin, Ellicott City, MD; David A. Wolf SR., Baltimore, MD;						
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/415,424 10/02/2002 and is a CIP of 10/602,022 06/24/2003 PAT 7,004,240 which claims benefit of 60/391,006 06/24/2002 This application 10/676,265 10/02/2003 is a CIP of 09/896,561 06/29/2001 PAT 6,889,754 which claims benefit of 60/215,588 06/30/2000						
<b>** FOREIGN APPLICATIONS *****</b>						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 01/10/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/LJILJANA V CIRIC/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWINGS</b> 24	<b>TOTAL CLAIMS</b> 51	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> TRASKBRITT, P.C./ ALLIANT TECH SYSTEMS P.O. BOX 2550 SALT LAKE CITY, UT 84110 UNITED STATES						
<b>TITLE</b> Evaporator for a heat transfer system						
<b>FILING FEE RECEIVED</b> 2534	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		